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Application of Docket Number

09/755701

(Column 1)

(Column 2)

OR

**OTHER THAN
SMALL ENTITY**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.18(a))		
TOTAL CLAIMS (37 CFR 1.18(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.18(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.18(d))

RATE	FEE
	\$ _____
12 _____	
12 _____	
12 _____	
TOTAL	

	RATE	FEE
OR		\$ _____
OR	X \$ _____	
OR	X \$ _____	
OR	+ \$ _____	
OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

(Column 1)

(Column 2)

(Column 3)

OR

**OTHER THAN
SMALL ENTITY**

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.101(d))	22	Minus	140
Independent (37 CFR 1.101(g))	3	Minus	3	-

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
+ \$ _____	
TOTAL ADDL FEE	

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
+ \$ _____	
TOTAL ADD'L FEE	

AMENDMENT B

CLAVIS GENERALIS

HIGHEST NUMBERED


PRESENT

24.55	1.50
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1. <i>Chlorophyll a</i>	1. <i>Chlorophyll a</i>
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AMENDMENT #	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	
	Total (37 CFR 1.150-3)	Minus				
	22		140		0	
	3		3		0	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(c))

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADDL. FEE	

	RATE	ADDITIONAL FEE
OR	X \$ _____ =	
OR	X \$ _____ =	
OR	+ \$ _____ =	
OR	TOTAL ADDITIONAL FEE	

AMENDMENT C

CLAIMS

HIGHEST

PRESENT

1999	2000
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AMENDMENT C	REMAINDING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total (of CFR 1.16(a))	22	Minus	140	"
Independent (of CFR 1.16(a))	3	Minus	3	"	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDITIONAL FEE
X \$_____ =	
X \$_____ =	
+ \$_____ =	
TOTAL ADDL FEE	

	RATE	ADDITIONAL FEE
OR	X \$ _____	
OR	X \$ _____	
OR	+ \$ _____	
OR	TOTAL ADDITIONAL FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

**** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".**

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.